

(b)(3)

(b)(1)

~~SECRET~~
(WHEN FILLED IN)

1. EMP. SERIAL NO.	2. NAME	3. ASSIGNED ORGAN.	4. FUNDS	5. ALLOTMENT							
[REDACTED]	HARVEY WILLIAM K	DDP/EE 13	[REDACTED]	[REDACTED]							
6. OLD SALARY RATE			7. NEW SALARY RATE								
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
17	1	\$13,975	01	15	56	17	2	\$14,190	07	14	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED, OR PRINTED, NAME OF SUPERVISOR			DATE			[REDACTED]			[REDACTED]		
[REDACTED]			27 June 57			[REDACTED]			[REDACTED]		
PERIODIC STEP INCR											

FORM NO. 560
1 MAR. 56

~~SECRET~~

PERSONNEL FOLDER (4)

APPROVED FOR RELEASE DATE: 08-19-2009

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